# FORM D

### UNITED STATES

	UNITED STATES
SECURI	TIES AND EXCHANGE COMMISSION Washington, D.C. 20549
EUEINED CO	FORM D

OV 1 6 2005 NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

COLUMN SECURITIES

SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Sale of Series A Preferred Stock and the Common Stock issuable upon conversion thereof.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506  Type of Filing: Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer  Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Mobius Microsystems, Inc.	05071892
Address of Executive Offices (Number and Street, City, State, Zip Code)  Grand Park Centre, Suite 1600, 28 West Adams, Detroit, MI 48226-1686	Telephone Number (Including Area Code) (313) 420-5400
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) as above	Telephone Number (Including Area Code)
Brief Description of Business Semiconductor integration circuit designers	PROCESSED
Type of Business Organization	MON SO SOM
□ corporation           □ limited partnership, already formed         □ business trust           □ limited partnership, to be formed         □ other	(please specify):
Actual or Estimated Date of Incorporation or Organization:    Month Year	Actual Estimated ate:

## GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers.  $\boxtimes$ Beneficial Owner Executive Officer Director Promoter General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) McCorquodale, Michael Business or Residence Address (Number and Street, City, State, Zip Code) Grand Park Centre, Suite 1600, 28 West Adams, Detroit, MI 48226-1686 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Wilkins, Jeffrey G. Business or Residence Address (Number and Street, City, State, Zip Code) Grand Park Centre, Suite 1600, 28 West Adams, Detroit, MI 48226-1686 Beneficial Owner Executive Officer □ Director General and/or Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Redelfs, Richard Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mobius Microsystems, Grand Park Centre, Suite 1600, 28 West Adams, Detroit, MI 48226-1686 Promoter Beneficial Owner Executive Officer □ Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Purushotham, Arvind Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mobius Microsystems, Grand Park Centre, Suite 1600, 28 West Adams, Detroit, MI 48226-1686 Beneficial Owner Executive Officer □ Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Sikes, L. David Business or Residence Address (Number and Street, City, State, Zip Code) Grand Park Centre, Suite 1600, 28 West Adams, Detroit, MI 48226-1686 Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Foundation Capital IV, L.P. and related entities Business or Residence Address (Number and Street, City, State, Zip Code) 70 Willow Rd, Suite 200, Menlo Park, CA 94025 Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Menlo Ventures IX, L.P. and related entities Business or Residence Address (Number and Street, City, State, Zip Code) 3000 Sand Hill Rd., Building 4, Suite 100, Menlo Park, CA 94025 (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В.	INFOR	MATION A	ABOUT OF	FERING				
1 L	Ina tha i	aguar cold	or does the is	suor intend t	o sell to no	ncoredited	investors in t	his offering?	,			Yes	No ⊠
1. F	ias the i	ssuer solu,	or does the is	suer miena i					ınder ULOE.		•••••••••	L	$\boxtimes$
2. V	Vhat is t	he minimu	m investment	that will be		•		-				\$	n/a
_	What is the minimum investment that will be accepted from any individual?									Yes	No		
	noes the offering permit joint ownership of a single unit?										$\boxtimes$	Ш	
re	remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associal person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If m												
		-	broker or dea to be listed a	-									
	ealer on		to be listed t		- persons or		or dealer, ye	od may set to		nation for the	at Olokel Ol		
Full Na	ame (La	st name fir	st, if individu	ıal)									
Busine	ss or Re	esidence Ac	idress (Numb	er and Stree	t, City, State	, Zip Code)							<u> </u>
Name	of Asso	ciated Brok	er or Dealer						<u></u>				
States	in Whic	h Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers							
			check individ									Па	II States
•				,								_	
{A	-	(AK)	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL	-	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
•	IT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R	13	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	(WV)	[WI]	[WY]	[PR]
Full N	ame (La	st name fir	st, if individu	ial)					——————————————————————————————————————				
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Busine	ss of Re	esidence Ac	idress (Numb	oer and Stree	i, City, State	, Zip Code)							
Name	of Asso	ciated Brok	ter or Dealer										
States	in Whic	h Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers							·
			check individ					•••••				Па	ll States
`[A		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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_	IT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R	IJ	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (La	st name fir	st, if individu	ial)	· · · · · ·	-							
Busine	ss or Re	esidence Ad	ddress (Numb	per and Stree	t, City, State	, Zip Code)							
Name	of Asso	ciated Brok	er or Dealer										
States	in Whic	h Person I	isted Has Sol	icited or Inte	nds to Solic	it Purchasers							
			check individ									Па	Il States
`	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[II		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
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	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS		
Ι.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security Debt	Aggregate Offering Price		Sold 0
	Equity	\$ <u>10,200,200.27</u>	S1	0,200,200.27
	Convertible Securities (including warrants)	\$0	\$	0
	Partnership Interests	\$0	\$	0
	Other (Specify)	\$0	\$	0
	Total	\$ 10,200,200.27		0,200,200.27
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
	Accredited investors	Number Investors 34	Doli of	aggregate lar Amount Purchase 0,200,200.27
	Non-accredited Investors			
			\$	
	Total (for filings under Rule 504 only)	n/a	\$	n/a
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
	Type of Offering	Type of Security	Dol	lar Amount Sold
	Rule 505	•	\$	_n/a
	Regulation A	n/a	\$	n/a
	Rule 504	n/a	\$	n/a
	Total	n/a	\$	n/a
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\$	0
	Printing and Engraving Costs		\$	0
	Legal Fees	$\boxtimes$	\$	100,000.00
	Accounting Fees		\$	0
	Engineering Fees		\$	0
	Sales Commissions (specify finders' fees separately)		\$	0
	Other Expenses (identify)		\$	0
	Total	$\boxtimes$	\$	100,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROC	EEDS		
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	of he		\$ <u>10,100,</u>	200.27
forth in response to Part C - Question 4.b above.	Payments Officers, Direc Affiliate	ctors &	Paymen Othe	
Salaries and fees	<b>\$</b>	0	<b>\$</b>	0
Purchase of real estate	□ s	0	□ \$	0
Purchase, rental or leasing and installation of machinery and equipment	□ <b>\$</b>	0	<b>S</b>	0
Construction or leasing of plant buildings and facilities	□ \$	0	□ s	0
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		0	<b>\$</b>	0
Repayment of indebtedness	☐ \$	0	□ \$	0
Working capital	<b>\$</b>	0	⊠ \$ <u>10,100</u>	,200.27
Other (specify):	□ \$	0	□ \$	0
Column Totals	□ s	0	<b></b> \$ <u>10,100</u>	,200.27
Total Payments Listed (column totals added)	$\boxtimes$	\$_10,100	),200.27	

5.

	D.	FEDERAL SIGNATURE	
	and Exchange Co		s filed under Rule 505, the following signature constitutes an its staff, the information furnished by the issuer to any non-
Issuer (Print or Type)	Signature		Date
Mobius Microsystems, Inc.	116000	Ma Letter	14, 2005
Name of Signer (Print or Type)	Title of Signer	(Print or Type)	
L. David Sikes	Chief Executive	e Officer	

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Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)

		E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.262 pres	sently subject to any of the disqualification provisions	s of such rule?	Yes	No ⊠
		See Appendix, Column 5, for state response.			
2.	The undersigned issuer hereby undertakes to f 239,500) at such times as required by state law	furnish to any state administrator of any state in which	n this notice is filed, a notice o	n Form D (	[17 CFR
3.	The undersigned issuer hereby undertakes to f	furnish to the state administrators, upon written reque	st, information furnished by th	e issuer to	offerees.
4.	· ·	ner is familiar with the conditions that must be satisfice notice is filed and understands that the issuer claiming atisfied.			
	e issuer has read this notification and knows the thorized person.	contents to be true and has duly caused this notice to	be signed on its behalf by the	undersigne	d duly
Iss	uer (Print or Type)	Signature	Date November 714		
Mo	obius Microsystems, Inc.	1 Uniona suns	NOVEMBER 19, 2005		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)	-		

Chief Executive Officer

## Instruction:

L. David Sikes

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	T :	2	3			4			5
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Intend to sell to non-accredited Type of security and investors in aggregate offering		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Series A Preferred Stock and the Common Stock issuable upon conversion thereof.	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		X	\$8,115,917.07	10	\$8,115,917.07	0	\$0		Х
со									
CT									
DE									
DC									
FL									
GA									
HI									
ID									
IL		х	\$97,751.70	2	\$97,751.70	0	\$0		X
IN									
IA									
KS									
KY					l				
LA									
ME									
MD									
MA									
MI		X	\$1,394,632.01	13	\$1,394,632.01	0	\$0		X
MN									
MS									
МО									
МТ									
NE									
NV									

1		2	3			4			5
	non-acc invest	Intend to sell to non-accredited investors in State (Part B-Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		amount purc	nvestor and chased in State C-Item 2)		under UL (if yes, explan waiver	ification r State OE , attach ation of granted c-Item 1)
State	Yes	No	Series A Preferred Stock and the Common Stock issuable upon conversion thereof.	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NH									
NJ									
NM									
NY		Х	\$45,049.47	1	\$45,049.47	0	\$0		Х
NC									
ОН		Х	\$496,850.02	7	\$496,850.02	0	\$0		Х
OK									
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT				unu			· · · · · · · · · · · · · · · · · · ·		
VT									
VA									<u> </u>
WA		Х	\$50,000.00	1	\$50,000.00	0	\$0		X
WI				and the state of t			, , , , , , , , , , , , , , , , , , ,		
WY									
PR									